



STATE OF NEW HAMPSHIRE

CEIVED

N 12 2018

NEW HAMPSHIRE
DEPARTMENT OF STATE

P I. Name of Lobbyist(s) David J. Cuzzi

E II. Name of lobbyist's partnership, firm or corporation, if any:

A [About WPS Office](#) | [WPS Office Help](#) | [Feedback](#)

Prospect Hill Strategies (Name of organization, firm or corporation)

Page No. _____ Date: 01/08/2018

Mr. Name of Client _____ Date 07/08/2018

I Political Contributions

N For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following:

Full name of candidate: **Chuck Morse**

Amount of contribution \$ 35.00 Office Candidate is Seeking State Senate

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Full name of candidate: Bill Gannon

(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 125 Office Candidate is Seeking State Senate

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Amount of contribution \$ _____ Office Candidate is Seeking _____

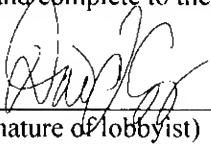
(turn over to continue →)

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual value.

cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.


(Signature of Lobbyist)

01/08/2018

(Date)

David J. Cuzzi
(Print Name of lobbyist)

State of New Hampshire
Signature Form for Associated Lobbyist
RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist

Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Prospect Hill Strategies

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): _____

Date of Report (check one):

April 26, 2017

July 26, 2017

October 25, 2017

January 31, 2018

I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):

Addendum A(s).

Addendum B(s).

Addendum C(s).

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.


(Signature of lobbyist)

01/08/2018

(Date)

David J. Cuzzi

(Print Name of lobbyist)

RECEIVED

JAN 12 2018

NEW HAMPSHIRE
DEPARTMENT OF STATE